

## **City of Santa Barbara**

## PLANNING COMMISSION (PC) & STAFF HEARING OFFICER (SHO) SUBMITTAL COVER SHEET

Date:_	
Fee:	
Staff:	

 $(For\ All\ PC\ \&\ SHO\ Submittals-Initial\ Filings\ Also\ Use\ Master\ Application)$ 

<b>DATE:</b>	MST #:
PROJECT STREET ADDRESS:	
CASE PLANNER:	
DATE OF LAST SUBMITTAL:	
ADDITIONAL COMMENTS:	
	REVIEW REQUESTED
□ SHe	PC REVIEW PC REVIEW
MODIFICATION ONLY SUBM	<u>ITTAL</u>
PRT INITIAL SUBMITTAL	
DART INITIAL SUBMITTAL	
DART RESUBMITTAL	
PC SUBSTANTIAL CONFORM	ANCE DETERMINATION
MISCELLANEOUS INFORMAT	ON
	nittal for DART and PRT. (Plans for resubmittals may vary.)
4 copies of plans required for "Modificati Please note that ABR & HLC submittals a	
Frease note that ADR & TILE Submittans	equire separate applications.
NAME OF PERSON TO CONTACT:	
Address:	
	ZIP CODE:
TELEPHONE:	
E-MAIL ADDRESS:	
SIGNATURE OF PROPERTY OWNER/AU	THORIZED AGENT:
$H: \label{lem:heaviside} H: \label{lem:heavis} H: lem:hea$	Revised February 11, 2006